SUPERIOR COURT OF THE DISTRICT OF COLUMBIA MARRIAGE BUREAU CIVIL WEDDING REQUEST INFORMATION

Spouse's Name
Spouse's Name
Spouse's Name
Spouse's S.S. No / Telephone No. H/W / MARRIAGE LICENSE INFORMATION APPLICATION DATE: / LICENSE NUMBER: ISSUED DATE: / / WEDDING DATE REQUESTED When do you want to be married? DATE: / / TIME: : AM / PM
Spouse's S.S. No / Telephone No. H/W / MARRIAGE LICENSE INFORMATION APPLICATION DATE: / LICENSE NUMBER: ISSUED DATE: / / WEDDING DATE REQUESTED When do you want to be married? DATE: / / TIME: : AM / PM
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WEDDING DATE REQUESTED When do you want to be married? DATE: / / TIME: AM / PM
When do you want to be married? DATE: / / TIME: : AM / PM
NUMBER OF GUESTS: WILL YOU HAVE PICTURES TAKEN? YES NO
HAVE YOU REQUESTED THE SERVICES OF A <u>JUDGE</u> OR <u>OFFICIAL</u> TO PERFORM YOUR WEDDING? YES NO IF YES, WHO?
NAME:
COURT: STATE:
TELEPHONE No WHERE WILL THE WEDDING BE PERFORMED?:
ADDRESS TELEPHONE No
CONFIRMATION OF THE CIVIL WEDDING WEDDING ADDOINTMENT MADE:
WEDDING APPOINTMENT MADE: / / / TIME: : AM / PM
NAME OF THE OFFICIAL.
NAME OF THE OFFICIAL:
FOR OFFICIAL USE ONLY
Request Entry Made PTR Issued
Appointment Entry MadeDisposition Entered
INSTITUTIONAL IDENTIFICATION(S)
SPOUSE PLACE SPOUSE PLACE